

FEE TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

Application Number	09/855,804	RECEIVED
Filing Date	May 16, 2001	CENTRAL FAX CENTER
First Named Inventor	Linda Ann Roberts	
Examiner Name	Jason E. Mattis	SEP 29 2005
Art Unit	2665	
Attorney Docket No.	BS00337	

TOTAL AMOUNT OF PAYMENT	\$790.00
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METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other
 Deposit Account Deposit Account No. 19-2167

Deposit Account Name:

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION
1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	160	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Enty Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>
— 20 or HP =	0	x 0
		= 0
<u>Multiple Dependent Claims</u>		
<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>
0		0

HP=highest number of independent claims paid for, if greater than 3.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	0	x 0	= 0

HP=highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250.00 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Fee (\$)	Fee Paid (\$)
- 100 =	0	/ 50	0 = 0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 37 CFR 1.114 Request for Continued Examination Fee

\$790.00

SUBMITTED BY:			Complete (if applicable)		
Name (Print/Type)	Bambi F. Walters	Registration No. (Attorney/Agent)	45,197	Telephone:	(757) 253-5729
Signature	<i>Bambi F. Walters</i>		Date	09/29/05	